



Overview

Trazodone (Desyrel® and generic forms) belongs to a group of medications called “antidepressants”. However, this medication is more commonly used to treat sleep disorders (insomnia).

What is *trazodone* used for?

Trazodone is approved by Health Canada for the treatment of depression in adults. Health Canada has not approved trazodone for the management of sleep difficulties or for use by children and adolescents. This is called “off-label” use and this occurs when your doctor has determined that the benefits of you taking this medication are greater than the risks (e.g. side effects). In children and adolescents, trazodone may be used to treat the following conditions:

- sleep disorders (insomnia)
- depression
- alcohol withdrawal
- anxiety disorders
- aggressive behaviour

Your doctor may be using this medication to you for another reason. If you are unclear why trazodone is being prescribed, please ask your doctor.



How does *trazodone* work?

Trazodone works by affecting the activity of the brain chemicals (neurotransmitters) called serotonin and histamine. By enhancing the action of these neurotransmitters, trazodone helps you to fall asleep faster and increase total sleep duration, as well as improving symptoms of depression.

How well does *trazodone* work in children and adolescents?

Trazodone may improve insomnia by shortening the time it takes you to fall asleep, decreasing the number of times you wake up during the night, and increasing your total sleep duration.

This medication may be particularly helpful for improving sleep in patients with symptoms of depression or other emotional and behaviour problems such as anxiety (nervousness), irritability (crankiness), or aggression.



Before starting treatment with trazodone for sleep, it is suggested that you try behavioural changes first to see if you have a need for medication. On the next page are some suggestions for developing good sleep habits (sleep hygiene). Sometimes, good sleep hygiene may be all that is needed to improve sleep difficulties. Whenever possible, adding good sleep hygiene strategies to trazodone therapy increases the chance you will benefit from this medication.

Sleep hygiene strategies:

- Avoid caffeine (from tea, coffee, colas or energy drinks) and alcohol, nicotine or other recreational drugs
- Keep a regular sleep/wake schedule every day; avoid sleeping in or napping during the day
- Avoid stimulating activities before bedtime (e.g. computer or television time or exercise late in the evening)
- Ensure a quiet and comfortable sleep environment (e.g. comfortable temperature, dark room, no pets in bed)
- Doing something relaxing or enjoyable before bedtime (e.g. listen to soothing music or take a warm bath)
- avoid large meals just before bedtime
- Exercise regularly (during the daytime)
- Use your bedroom only for sleep; remove the clock from direct eyesight
- If you are not asleep within 20 minutes, get up and go to another room. Come back to bed when you feel drowsy.

Testing of trazodone in research studies of children and adolescents has been limited, and trazodone is rarely used for treatment of depression in children and adolescents. In some studies of children and adolescents with depression, medications like trazodone have been found to help about **5-6 people out of every 10 who are treated**. Some of these studies also found that antidepressants were not better at treating the symptoms of depression than a placebo (an inactive pill that looks like the medication). In general, depressed youth who take trazodone for 2-3 months should notice an improvement in their depressive symptoms (*such as improved mood, better sleep, more energy, and improved concentration*). Whenever possible, the addition of behavioural therapy such as *Interpersonal Therapy (IPT) for depression* or *Cognitive Behaviour Therapy (CBT)* to this medication may help to increase the potential for benefits.



How should *trazodone* be taken?

Trazodone is available as tablets that are taken by mouth. For sleep difficulties, usually a low dose is taken once daily at bedtime. Some patients may only need to take trazodone occasionally on an as-needed basis for sleep difficulties, while other patients may take it regularly. Discuss with your doctor how you should take this medication.

When used to treat depression, your doctor may start with a lower dose that is taken two to three times daily. Then, the dose is slowly increased every based on how you respond to it. Your doctor will determine how much trazodone you should take, according to your symptoms and your response to this medication.

You and your doctor can discuss the best dosage to stay on based on how you tolerate this medication (how well the medication is working and how you are doing with the side effects of the medication) and how well it helps to decrease your symptoms.

When used to treat depression, trazodone needs to be taken regularly on a daily basis in order to be effective (even if you feel well). You should take this medication at the same time(s) each day as directed by your doctor. Try to connect it with something you do each day (like eating breakfast or brushing your teeth) so that you don't forget.

When used to treat depression, take trazodone after meals or with a light snack to decrease your risk for side effects such as dizziness and lightheadedness. Do not drink alcohol while taking this medication, as it may result in increased side effects (e.g. increased drowsiness and impaired coordination).

When will *trazodone* start working?

If you are taking trazodone for sleep, you should start feeling drowsy within 30-60 minutes of taking trazodone.

If you are taking trazodone for depression, it may take 2 to 3 weeks before you start seeing improvements in your symptoms. It may take 4 weeks to see the full effect of this medication. **Since this medication takes time to work, do not increase, decrease or stop it without discussing it with your doctor first.**



How long do I have to take *trazodone*?

Discuss with your doctor how long you may need to take trazodone.

When used for sleep disorders, some patients take trazodone occasionally on an as-needed basis, while others may take it regularly for as long as sleep problems persist, which can range from several weeks to several months.

When used to treat depression, the length of treatment depends on the symptoms you have, how frequently they occur and how long you have had them. Most patients need to take this medication for at least 6 months. This allows time for your symptoms to stabilize and for you to regain functioning. After this time, you and your doctor should discuss the benefits and risks of continuing treatment. If you have had several episodes of severe depression and you tolerate this medication well, you may be asked to take this medication for an indefinite amount of time. By continuing to take this medication, you significantly decrease the chance of having another episode of depression. **Do NOT stop taking this medication (even if you are feeling better) without discussing it with your doctor first. If you stop taking this medication suddenly, it is possible that your symptoms may return.**

Is *trazodone* addictive?

Trazodone is not addictive. You will not have “cravings” for it like some people do with nicotine or street drugs. In contrast to other sleep medications such as benzodiazepines (e.g., lorazepam (Ativan[®])) and zopiclone (Imovane[®]), trazodone does not have a risk of physical or psychological dependence.

What are the side effects of *trazodone* and what should I do if I get them?

As with most medications, side effects may occur when taking trazodone. Most side effects are mild and temporary. Sometimes, side effects of this medication may occur before any of the beneficial effects. It is possible for some individuals to experience side effects that they feel are serious or long lasting. If you feel this has happened, speak with your doctor right away. Below are some of the more common side effects of taking this medication. In brackets are suggested ways to lessen these effects.

Common side effects

Side effects may be more common when starting a medication or after a dose increase. If any of these side effects is too troublesome for you, please discuss them with your doctor, nurse or pharmacist.

- Blurred vision (*do not drive or operate machinery until you know how this medication affects you.*)
- Constipation (*try drinking more fluids, exercising, or increasing the amount of fiber in your diet*)
- Dry mouth (*try chewing sugarless gum or sucking hard sugar-free candies, ice chips, or popsicles*)
- Dizziness, lightheadedness (*try getting up slowly from a sitting or lying down position. Do not drive or operate machinery until you know how this medication affects you.*)
- Headache (*try using a pain reliever like acetaminophen (Tylenol[®])*)
- Incoordination (*do not take drive, operate machinery or take part in activities that require physical coordination until you know how this medication affects you*)
- Morning drowsiness/tiredness following trazodone use (*this usually goes away if the dose is decreased. Do not drive or operate machinery until you know how this medication affects you*)
- Nausea, vomiting, stomach ache (*try taking with food*)
- Shakiness (tremors), muscle aches



This medication may affect your ability to drive, operate machinery or carry out tasks that require mental alertness. This effect may be more pronounced if this medication is taken with alcohol.

Uncommon side effects (e.g. those occurring in less than 5% of patients)

Contact your doctor **IMMEDIATELY** if you have any of these side effects:



- Change in mood to an unusual state of excitement, irritability or happiness
- hallucinations (hearing or seeing things that are not there)
- irregular heart beat (palpitations)
- skin rash, itchy skin or hives
- thoughts of self-harm, hostility or suicide
- for males: prolonged (i.e., more than four hours), inappropriate, and/or painful erections of the penis (*this effect is very rare. However, this is a potentially very serious effect that may cause permanent damage. Stop this medication immediately and seek emergency medical help if you experience these effects.*)

What precautions should my doctor and I be aware of when taking *trazodone*?

Several medications may interact with trazodone, including sleep aides or antihistamines such as diphenhydramine (Benadryl[®], Nytol[®]) and doxylamine (Unisom[®]); anti-anxiety medications such as lorazepam (Ativan[®]), antidepressants, mood stabilizers such as lithium, monoamine oxidase inhibitors such as selegiline (Eldepryl[®]) or phenelzine (Nardil[®]), and several others. If you are (or begin) taking any other prescription or over-the-counter medications, be sure to check with your doctor or pharmacist to see if they are safe to use. Your doctor may need to change the doses of your medication(s) or monitor you carefully for side effects if you are taking certain other medications.

Tell your doctor or pharmacist if you:

- drink alcohol regularly or have a history of alcohol or drug abuse/addiction
- have had allergies or bad reactions to trazodone or any other medication
- have a heart condition or seizure disorder
- have liver or kidney problems
- have a history of breast cancer, sickle cell anemia, multiple myeloma or leukemia
- have bipolar disorder or any other psychiatric condition, thoughts of self harm or suicide
- miss a period, become pregnant or are trying to become pregnant or are breast-feeding

What special instructions should I follow while using *trazodone*?

- Keep all appointments with your doctor. Inform your doctor about your sleep pattern and/or symptoms of depression. Your doctor will monitor your condition and your response to this medication.
- Do not allow anyone else to use your medication.

What should I do if I forget to take a dose of *trazodone*?

If you take trazodone regularly for sleep and you forget to take it, skip the missed dose and take your next dose at its regularly scheduled time the next day. Do NOT double your next dose.

If you take trazodone for depression and you forget to take it, take it as soon as you remember. However, if it is within 4 hours of your next regularly scheduled dose, skip the missed dose and continue with your regular schedule. Do NOT double your next dose.



What storage conditions are needed for *trazodone*?

- Keep this medication in the original container, tightly closed and protected from light. Store at room temperature away from moisture and heat (e.g., not in the bathroom).
- Keep this medication out of reach and sight of children.

You may wish to share this information with your family members to help them to understand your treatment options. Since every person's needs are different, it is important that you follow the advice provided to you by your own doctor, nurse and/or pharmacist and speak to them if you have any questions about this medication.

Developed by the health care professionals of the Child & Adolescent Mental Health Programs and reviewed by the staff of the Kelty Resource Centre.